

**Alcoholics Anonymous in Melbourne, Australia**

**Observations of a Welfare Worker**

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The alcoholic has frequently been the concern of welfare organizations throughout the world. The complication of alcoholism usually sharpens the problems which bring a client to the welfare office and makes it considerably more difficult for aid to be rendered effectively. The most desirable step, obviously, would be to overcome the alcoholism. Sometimes this alone may be sufficient to lead to the solution of other problems. In the past the resources of welfare organizations in dealing with the problem of alcoholism have been extremely limited. The advent of Alcoholics Anonymous seemed to offer a fresh opportunity, provided an effective approach were employed. In the following paragraphs the techniques adopted in one welfare organization in Australia to promote the rehabilitation of alcoholics through cooperation with Alcoholics Anonymous will be described.

It took 2 years for the name, Alcoholics Anonymous, to become generally known in Australia. The bare knowledge of the existence of such an organization, however, was not sufficient to attract a large number of alcoholics. Too much of the publicity given to A.A. came from nonalcoholics, mostly members of the clergy who stressed only its religious side.

One major difficulty, which still prevails, was to get in touch with the alcoholic who wanted to stop drinking. Owing to the fact that a welfare officer of the Brotherhood of St. Laurence was associated with work on alcoholism and A.A., quite a number of problem drinkers made a tentative approach regarding a "cure." Some were coerced into calling by their wives and families. Sometimes their attitudes to us was frankly hostile. Some wanted to have nothing to do with "religion"; some were plainly cynical, while others were "willing to try anything." Many stated that they would not attend a meeting.

The majority were adverse to meeting a "lot of drunks." They had often interpreted the word "meeting" to mean a revivalist meeting. They expected to be exhorted and moralized with. Consequently the first interview was devoted mainly to combating preconceived notions of Alcoholics Anonymous brought about by bad publicity.

One major objective was kept in mind at this first interview: to persuade the alcoholic to attend a meeting of the group. This was done by inquiring, after the usual preliminaries, concerning their understanding of alcoholism, and then explaining it in terms of Dr. Roger J. Williams' paper *The Etiology of Alcoholism*: motives for drinking in the first place, the setting up of an addiction, the time variation due to variance of the metabolic pattern, the parallel with morphine addiction, and so forth.

The exposition of Dr. Williams' hypotheses - regardless of their correctness or otherwise - proved a powerful weapon in transforming the alcoholics' emotionally tinged attitude. It showed our own attitude to the problem and ruled out anything in the nature of moralizing. Several people thus interviewed remarked that we "were the only people who understood" them - a remark which meant not what it conveyed but that they liked our approach to the subject.

Some of the most hostile of these visitors become very good members of Alcoholics Anonymous. This may be due to the fact that the hostility arose as a result of encroachment on their independence - a useful trait if it could be turned in the right direction.

Once introduced to the group, few failed to return. They usually had a few drinks before attending the first meeting, and some before the second and third also. Then they began to arrive "dry." Some members managed to stop drinking without hospitalization and without the use of drugs. In other cases they could not break the cycle of sleeplessness, remorse and more alcohol without medical aid. Good results were obtained in some of the latter cases with the administration of sedatives at night and benzedrine during the early hours of the day. Others were able to stop drinking only after a period of hospitalization. Once sobered up the real work of keeping them sober began.

It is probably impossible to enumerate all the influences of a group on a new member. Foremost is the camaraderie of the group and the process of identification. In the latter, the new member realizes that he is the same as

many other members; that he is not "different." He learns for the first time that his alcoholism can be overcome. The frank and unemotional attitude of the group becomes his attitude, and a feeling of optimism follows. He loses his feelings of guilt; and, once free from the physical effects of drinking, he is in a mental state, often for the first time in years, to really fight against the impulse to drink.

In group work, repetition has been deliberately used. It was pointed out that there is a difference between being told something and being able to repeat it on the one hand, and, on the other hand, an idea implanted on the mind so firmly that the reaction to it is automatic. The idea that "one drink is fatal" was treated in this way. The experiences of members who "slipped" were used to give emphasis to this idea. The advent of newcomers was used to go over the whole ground again.

Religion, as far as worship and creed are concerned, is left strictly to the individual. The Twelve Steps of Alcoholics Anonymous are interpreted, as far as possible, in a way to include everybody and to offend no one. Religion is defined as meaning "way of life." Using this as a basis, the Twelve Steps become more practical. The first step, "We admitted we were powerless over alcohol," by the very fact that a person approaches A.A. for help, presupposes that he cannot cope with his drinking and is seeking a new way of life. If he believes that Alcoholics Anonymous, or anything else, can help him, the second step is also admitted by the very fact of his approach to A.A.

The mental-catharsis aspect also required careful handling. Several members would have retreated if rushed on this matter. Such a catharsis, however, may be effected over a period of months and often is effected without the individual being aware of what is happening. By talking things out, a little at a time, sometimes with the group and sometimes with one individual, the member gradually achieves an abreaction that is as effective as a conscious effort carried out at one or two sessions. The gradual loosening up, the greater frankness and the loss of tension indicate clearly what is happening.

All members of the group recognize the value of working with other alcoholics, particularly with a member of the group who has "slipped." In working with the latter they see the sharp personality change and at the same time acquire a feeling of responsibility.

The camaraderie of the group is important but it must be real, not a false

"Hail fellow, well met" attitude. Newcomers have been made to feel at home while at the same time the group has avoided gushing over them. Meetings of the group are quite informal, with discussion arising from short talks on such subjects as "adjustment to society"- stressing the need for all individuals to know a group of people with whom they can "be themselves." An alcoholic, while drinking, can very rarely do this in his everyday world; A.A. enables him to do so. Talks on emotional development, and the like, have also led to fruitful discussion.

The members of the group tend to fall into two main categories. The first consists of those individuals who, as a result of social and occupational drinking, have drifted into a stage where drinking has become a compulsion. No underlying psychotic tendencies or serious social maladjustments are noticeable. It is these men who have remained sober for the longest periods. Once they have accepted the idea that they cannot drink, they can act on that idea.

One of this group is employed as a barman and has been abstinent for 18 months. Others frequent hotels and clubs and drink spa-water. None of this group admits or shows signs of mental conflict. This could, perhaps, be classed as simple alcoholism.

The second category presents a very different problem. It consists of individuals in whom the alcoholism appears to be merely a symptom of an underlying mental disorder. Each individual could be the subject of a lengthy study. If any common factor could be found, it would have to be something vague, such as "emotional immaturity." Acute anxiety is common, but not general. In at least one instance there has been complete absence of insight. Acute depression with ideas of suicide is not rare. Two individuals in this category have been diagnosed as mild schizophrenics.

The efforts made by this latter group to remain sober have equaled the efforts of the first group, but with different results. In the majority of cases a tension is gradually built up over a period of months until it is relieved by a bout. Then they are full of remorse but appear mentally relaxed. It is usually possible to predict these bouts with some degree of accuracy. Some individuals, however, are unpredictable. They may appear happy and confident immediately before they drink. They may have planned to attend a group meeting an hour or two later; instead they drink. Self-indulgence seems to be their keynote.

Several members of this second group have had treatment by a psychiatrist; but whereas the neurotics can be persuaded to see and cooperate with a psychiatrist, much resistance to this step is encountered among the depressives. While no permanent results have been obtained with this group, it is felt that, if the pattern of their drinking can be changed and they can be kept sober, say, for 11 months out of 12, some good has resulted.

The emphasis of the Alcoholics Anonymous group has been to bring the problem drinker down to earth and keep them there. Talk of "miracles" has been discouraged, as has anything in the nature of "recitals" of drinking bouts indicating how much alcohol the speaker could consume. Apart from these things, and party politics and denominational religion, everyone is allowed to talk as he pleases.

The group has gained its successes with those who have had a sound pattern of life behind their alcoholism. Those who have been able to hold a job for a long period, learn a trade or profession, and keep a home together, have been successful in Alcoholics Anonymous. The psychopathic cases have failed. The following summaries of case reports are typical of these groups.

**Case 1.** - T.T. age 43. Maintenance engineer. Married; two children. Good home. Since age 20 had been in habit of having a few drinks after work. Drinking gradually became excessive and threatened to wreck home and job. Approached A.A. on own volition after reading newspaper article and, on joining the group, was impressed by the simple idea that he could not take one drink. Now states that this idea has been the most important thing in A.A. to him. Has been sober 21 months since joining the group. Participates well in group work and goes out of his way to help others. Is hypermanic type and readily adjusts himself to his environment. Never admits or gives indication of conflict or anxiety.

**Case 2.** - E.V. Age 47. Traveler. Married; one child. Drank in long bouts with only short intervals between bouts. Stayed sober 6 months after joining A.A. Suffers from acute depression, attacks of which may last 2 or 3 months. Becomes violent when drunk, at which time memory is impaired. Cannot be persuaded to cooperate with psychiatrist. Is easily upset and drinking bouts are again becoming frequent.

It is apparent that such a group as has been described exerts many influences upon each member, influences that may be loosely classified under

the heading of "group therapy;" and that a friendly and casual atmosphere in the group, far from lessening these influences, may strengthen them. As different members are influenced by different things, it is essential that each member should understand and respect the varying influences, if they are to be maintained.

The work described herein has proved to be the most interesting, and in some ways the most satisfactory, of all the projects undertaken by this writer as a social worker. Some years must elapse, however, before the results of this effort can be accurately evaluated. In the meantime, it is expected that the Alcoholics Anonymous group will gradually evolve its own methods and improve on a system imposed from the outside in a somewhat dubious trial and error method.